U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U - 3/96

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

| | 01 / 01 / 2005 Through: 12 / 31 / 2005 | | | | |
|--|--|--|--|--|--|
| 3. Name and address of person filing. | 4. Name, file number, and address of labor organization. | | | | |
| Mike Porter - | Name United Steelworkers Local 351L Labor Organization File Number 003-483 | | | | |
| P.O. Box, Bldg., Room No., if any | P.O. Box, Building and Room Number, if any | | | | |
| 17025 Romalus Ch Rd Street Bull, AL city | Street 1923 Culver Road City Tuscaloosa | | | | |
| State ZIP Code + 4 3544 L | State Alabama ZIP Code + 4 35401 | | | | |
| 5. Position in labor organization. | | | | | |
| Treusure | | | | | |
| Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): | | | | | |
| A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. | | | | | |
| 6. Name and address of Employer (including trade name, if any). | 7.a. Nature of Interest, Transaction, or Income. | | | | |
| Name The Credit Union of Alabama FCU | 1. CO #306. 56 2 CD . \$285. 74 | | | | |
| Trade Name, if any: | 3 cheding - # 3. 39 | | | | |
| P.O. Box, Bldg., Room No., if any | 3 cheding \$3.39 4 Saving \$30.47 | | | | |

Signature

ZIP Code + 4 35464

7.b. Amount.

\$146,000 00 (LOCA)

| SUDMINICO IN MIS 16 | fication. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, including the information contained in any accompanying documents), has been examined by the signa e and belief, true, correct, and complete. (See the section on penalties in the instructions.) | that all of the information tory and is, to the best of the |
|---------------------|---|---|
| á. | _ | |

| Signed mike forter | On <u>3-/3-06</u> Date | |
|--------------------|---------------------------|--|
| | | |

TuscalossA City

1215 Veterans Memorial Parkway